ASSOCIATION OF UNIVERSITY CARDIOLOGISTS INSTRUCTIONS FOR PROPOSAL FOR MEMBERSHIP

In order to comply with the provisions of the Constitution, the Council should have the following information available for review:

1. Formal nomination (proposal form included in this package)

Supporting letters of recommendation from:

- a) Proposer, indicating candidate's outstanding ability and promise in academic cardiology
- b) Seconder
- c) Responsible member of the nominee's medical school faculty to document nominee's full time status and major responsibilities for the teaching and research programs in clinical cardiology at his/her institution
- 2. Nominee's Curriculum Vitae with bibliography
- 3. 250 word summary regarding teaching and research responsibilities.
- 4. Additional letters of recommendation (no more than 6)
- 5. Original in PDF format
- 6. If you wish to **renominate** someone who was not chosen the previous year, we only need the letters mentioned above in #2 (an updated letter from the nominator, seconder, and another responsible faculty member from the nominee's institution documenting current status 3 letters total). If there have been significant changes in the nominee's CV, you may want to resubmit a revised cv.

These requirements are due by December 15, 2019.

BEFORE SUBMISSION TO THE EEXECUTIVE ADMINISTRATOR, THE FOLLOWING CHECKLIST MUST BE COMPLETED AND ATTACHED TO THE FRONT OF THE NOMINATION MATERIAL:

Checklist (page 1)
Proposal form (Page 2)
250 word narrative of nominee's professional responsibilities with respect to teaching and research in cardiology (Page 3) Letter from proposer
Letter from seconder
Letter from another responsible faculty member documenting status, etc.
Curriculum Vitae
Additional reference letters (these should be forwarded by proposer)
Copy (1 copy in PDF format)
PLEASE SUBMIT ALL MATERIALS TO:
Talar Doreabakian

Talar Dersahakian Cedars-Sinai, 127 S San Vicente Blvd. AHSP-A3100, Los Angeles, CA 90048

ASSOCIATION OF UNIVERSITY CARDIOLOGISTS

PROPOSAL FOR MEMBERSHIP

(Return to Executive Administrator by **December 15, 2019**)

Name in Full:	
Date of Birth (Used to determine eligibility for Emeritus status):	
Address:	
Office Phone:	
Fax Number:	
A a sistemtic Nome	
Assistant's Name Assistant's Email	
Home Address:	
Home Phone:	
Faculty Position:	
Institution:	
Proposed by:	
Seconded by:	
	(letter of endorsement attached)
Additional letters of support (atta 6):	ched) from the following members of the Association (maximum
	
Letter of documentation of nomin	nee's status by:
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[The proposer is to request from a responsible member of the nominee's medical school faculty a letter of documentation of the nominee's full-time status and major responsibilities for the teaching, research programs, and leadership in Clinical Cardiology at his/her institution.]

Attach a copy of the nominee's Curriculum Vitae and Bibliography to date.

On attached sheet, submit a brief summary or narrative of nominee's professional responsibilities with respect to teaching and research in Cardiology. This information will be provided to the general membership at the annual meeting so they can review prior to voting.

ASSOCIATION OF UNIVERSITY CARDIOLOGISTS			
NAME OF NOMINEE:			
BRIEF NARRATIVE OF NOMINEE'S PROFESSIONAL RESPONSIBILITIES <u>WITH RESPECT TO TEACHING AND RESEARCH IN CARDIOLOGY</u> : (Please attach narrative.)			
SUBMIT Material in PDF Format			
BY DECEMBER 15, 2019, TO:			
Talar Dersahakian			
Cedars-Sinai,			
127 S San Vicente Blvd.			
AHSP-A3100,			
Los Angeles, CA 90048			

FOR OFFICE LIGE ONLY	
FOR OFFICE USE ONLY	
Action taken by Council:	Date:
Election by Members:	Date:
Notification of Election:	Date: